

Rec'd PCT/PTO 25 JAN 2006

BAKER BOTTS L.L.P.
FILE NO. 066340.0222

10/534004

**COMBINED DECLARATION
AND POWER OF ATTORNEY**

(Original, Design, National Stage of PCT, Divisional, Continuation or C-I-P Application)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND COMMUNICATION DEVICE FOR EXPANDING THE RANGE OF DATA
TRANSMISSION RATES IN WIRELESS LOCAL AREA NETWORKS**

This declaration is of the following type:

- ☐ Original
- ☐ Design
- ☒ national stage of PCT.
- ☐ Divisional
- ☐ Continuation
- ☐ continuation-in-part (C-I-P)

the specification of which: (complete (a), (b), or (c))

- (a) ☐ is attached hereto.
- (b) ☒ was filed on June 22, 2005 serial no. 10/540,054.
- (c) ☐ was described and claimed in PCT International Application No. filed on and was amended on (if applicable).

Acknowledgement of Review of Papers and Duty of Candor

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of the subject matter claimed in this application in accordance with Title 37, Code of Federal Regulations § 1.56.

- ☐ In compliance with this duty there is attached an information disclosure statement. 37 CFR 1.98.

Priority Claim

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT International Application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT International Application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application on which priority is claimed

(complete (d) or (e))

- (d) ☐ no such applications have been filed.
- (e) ☒ such applications have been filed as follows:

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PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION				
COUNTRY	APPLICATION NO.	DATE OF FILING (day, month, year)	DATE OF ISSUE (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Germany	103 99366.5	06 January 2003 ✓		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	103 00 366-5			<input type="checkbox"/> YES <input type="checkbox"/> NO
				<input type="checkbox"/> YES <input type="checkbox"/> NO
ALL FOREIGN APPLICATION[S], IF ANY, FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION				
WIPO	PCT/DE03/04218	19 DECEMBER 2003		<input type="checkbox"/> YES <input type="checkbox"/> NO
				<input type="checkbox"/> YES <input type="checkbox"/> NO
				<input type="checkbox"/> YES <input type="checkbox"/> NO

Claim for Benefit of Prior U.S. Provisional Application(s)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Provisional Application Number	Filing Date

Claim for Benefit of Earlier U.S./PCT Application(s) under 35 U.S.C. 120
(complete this part only if this is a divisional, continuation or C-I-P application)

(Application Serial No.)	(Filing Date)	Status (patented, pending, abandoned)

Power of AttorneyAs a named inventor, I hereby appoint the practitioners at Customer Number 21003 of the firm of BAKER BOTTS L.L.P., with offices at 30 Rockefeller Plaza, New York, New York 10012, as attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith

SEND CORRESPONDENCE TO: <u>BAKER BOTTS L.L.P.</u> <u>30 ROCKEFELLER PLAZA, NEW YORK, N.Y. 10112</u> <u>CUSTOMER NUMBER: 21003</u>	DIRECT TELEPHONE CALLS TO: <u>BAKER BOTTS L.L.P.</u> <u>(212) 408-2500</u>
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1-00 FULL NAME OF SOLE OR FIRST INVENTOR	LAST NAME <u>NITSCHÉ</u>	FIRST NAME <u>GUNNAR</u>	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY <u>RADEBEUL</u> DEX	STATE or FOREIGN COUNTRY <u>FED. REP. OF GERMANY</u>	COUNTRY OF CITIZENSHIP <u>GERMANY</u> ✓	
POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>NIZZA STRASSE 34</u>	CITY <u>RADEBEUL</u>	STATE or COUNTRY <u>FED. REP. OF GERMANY</u>	ZIP CODE <u>D-01445</u>
DATE * 4 Oct 2005	SIGNATURE OF INVENTOR <i>Gunnar Nitsche</i>			
2-00 FULL NAME OF SECOND INVENTOR	LAST NAME <u>HOEMANN</u>	FIRST NAME <u>MATTHIAS</u>	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY <u>FREITAL</u> DEX	STATE or FOREIGN COUNTRY <u>FED. REP. OF GERMANY</u>	COUNTRY OF CITIZENSHIP <u>GERMANY</u> ✓	
POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>ZUM POISEN WALD 18</u>	CITY <u>FREITAL</u>	STATE or COUNTRY <u>FED. REP. OF GERMANY</u>	ZIP CODE <u>D-07105</u>
DATE * 4 Oct 2005	SIGNATURE OF INVENTOR <i>Matthias Hoemann</i>			
3-00 FULL NAME OF THIRD INVENTOR	LAST NAME <u>AUE</u>	FIRST NAME <u>VOLKER</u>	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY <u>DRESDEN</u> DEX	STATE or FOREIGN COUNTRY <u>FED. REP. OF GERMANY</u>	COUNTRY OF CITIZENSHIP <u>GERMANY</u> ✓	
POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>VOGLER STRASSE 4</u>	CITY <u>DRESDEN</u>	STATE or COUNTRY <u>FED. REP. OF GERMANY</u>	ZIP CODE <u>D-01277</u>
DATE * 8 Oct 2005	SIGNATURE OF INVENTOR <i>Volker Aue</i>			
FULL NAME OF FOURTH INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY	STATE or FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE or COUNTRY	ZIP CODE
DATE	SIGNATURE OF INVENTOR			
FULL NAME OF SOLE OR FIFTH INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY	STATE or FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE or COUNTRY	ZIP CODE
DATE	SIGNATURE OF INVENTOR			